

# Disasters

## Preparedness and Mitigation in the Americas



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### Climate Change and Disaster Programs in the Health Sector

Editorial



Photo: Logan Ross/MINGUHA

For decades, there have been endless discussions, debates, publications as well as political stances on climate change. For almost as long, the topic was surrounded with controversy caused by insufficient scientific evidence, conflicts of interest or the syndrome of the ostrich burying its head in the sand.

Ultimately, scientists, agencies and govern-

ments reached a consensus on diagnosis and above all on the need to take actions to reduce current and future impact. As the WHO Director General clearly summarized, "The scientific evidence continues to mount. The climate is changing, the effects are already being felt, and human activities are the principal cause".

To further stress the health dimension of this ongoing climatic change, the World Health Organization selected "Protecting Health from Climate Change" as the theme for the World Health Day (WHD) in 2008. The toolkit prepared for this WHD includes a fact sheet on the potential health impact of global warming. It is a must for every disaster coordinator to read!

First, it unambiguously summarizes the facts:

- climate change is happening now and is accelerating.
- sea levels are rising as glaciers are melting.
- precipitation patterns are changing.
- extreme weather events are changing in frequency and intensity.

The latter is of more direct relevance to disaster managers. There is evidence of a marked increase in the numbers of the most extreme cyclones in recent decades, and this trend is likely to continue. Studies indicate that a doubling of the level of carbon dioxide in the atmosphere, expected within about 80 years, will result in an increase of only about 6% in average cyclone windspeed but of 300% in the frequency of the largest (category 5) storms.

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### Interview

We will begin this new section with an interview with the Director of the Pan American Health Organization, Dr. Mirta Roses Periago, in which she gives her vision and opinion of the work and contribution of PAHO/WHO in the area of emergencies and disasters.

*1. Once again, we have witnessed the high cost, in both human and financial terms, of hurricanes in the Caribbean. Keeping in mind the lessons learned from these and other disasters, how can the health sector in the Americas*

*be better prepared and improve safety in the face of disasters?*



Dr. Mirta Roses Periago

Disaster preparedness is a continuous process of improving the capacity to respond to emergencies. This implies keeping disaster response plans up-to-date,

investing in proper training for the health workforce and designating sufficient resources to respond to emergencies and disasters. In the eyes of PAHO/WHO, the formal establishment of a unit or office in each Ministry

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### Changes to the "Disasters" Bulletin

As of this edition our bulletin: "Disasters, Preparedness and Mitigation in the Americas" will be published every six months and will be increased to 12 pages.

Those interested in receiving an electronic copy only such write to [disaster-newsletter@paho.org](mailto:disaster-newsletter@paho.org).



**Pan American  
Health  
Organization**



Regional Office of the  
World Health Organization

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## Climate Change and Disaster Programs in the Health Sector

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Should disaster managers be concerned with fiercer hurricanes or more devastating El Nino occurrences? Yes. Are these climatic disasters the only or even the most important health crises likely to affect the Caribbean and Latin America as a result of climate change? Unfortunately, not!

Much has also been written on the potential of new or more widespread epidemics of communicable diseases. These outbreaks are unlikely to be the direct consequence of climatic disasters (floods, hurricanes...) but they will result from permanent conditions which are more favorable to longer-lasting, widespread transmission of many diseases. Many vector borne diseases are good candidates: malaria and dengue among others. Water borne diseases such as diarrhoea have a seasonal cycle...incidence increases in summer and /or rainy season. Future changes in seasonal patterns will affect their incidence.

Sudden disasters, be they hurricanes or epidemics are one of the alternatives. Climate change will have other serious health effects, many resulting from the social or economic hardship that global warming will have on the most vulnerable countries. These changes may be country specific: Food insecurity in some countries, coastal erosion or economic hardship in others. Finally some countries or areas may well benefit overall. That is likely to be the exception as disaster coordinators will find themselves in an increasing number of potential complex crises requiring flexible and action-oriented emergency preparedness and response capacity.

The situation can best be summarized by quoting WHO: "In the long run, the greatest health impacts may not be from acute shocks such as natural disasters or epidemics, but from the gradual build-up of pressure on the natural, economic and social systems that sustain health, and which are already under stress in much of the developing world". These gradual stresses include reductions and seasonal changes in the availability of fresh water, regional drops in food production, and rising sea levels. Each of these changes has the potential to force

population displacement and increase the risks of civil conflict.

In brief:

- Global warming is occurring, although preventive measures, if enacted in time, may reduce its magnitude
- Negative impacts will far exceed the positive ones.
- The negative effects will be concentrated on poor populations that already have compromised health
- The main effects will vary from country to country
- Catastrophic climatic disasters and epidemics are only two, and not the most worrisome, of the scenarios
- Food and water shortages will worsen, civil disturbances and displacements may also occur

What needs to be done? The solution is NOT in drafting plans for the worst case scenarios of catastrophic hurricanes for instance. Neither is massive stockpiling of supplies and food realistic in poor countries. Improving the coping capacity is the best alternative. Strengthening of public health services needs to be a central component of adaptation to climate change.

In the past, a health disaster coordinator could afford to run a vertical program with little true cooperation

from and coordination with others. The strength of the disaster program was in its readiness to respond to sudden impact events which affected the rest of the system. Under the future scenario of unchecked global warming, crises will be protracted social events. The added value and continuing raison d'être of the emergency preparedness program will be its capacity to assist the entire sector in responding to ongoing crises, shortages and deteriorating services. Assessment of the vulnerability of the health sector will require an expert in disasters who is qualified, flexible and practical, open to collaboration and interaction with many experts and with the scientific community, particularly meteorologists. Crisis management may well become everyone's daily

*The time is right and the opportunity is at hand for disaster coordinators to prepare for this change in function and to strengthen their links with other health areas.*



Photo: Layan Rivas/AMULSTH

business under the coordination of a small cell at cabinet level rather than a full blown technical program.

Today is the time and opportunity for disaster coordinators to prepare for this change in function, to strengthen their links with all other departments, especially on communicable diseases, and act as the strongest promoters for adoption of cross-sectoral preventive measures while launching a sustained initiative for collective assessment of specific vulnerabilities of the country.

A few do and don'ts should guide disaster coordinators:

- Do think long-term by promoting risk reduction and behavior change.
- Do think short or medium term for your operational contingency planning. There is no point in planning today for something that may only occur in several decades after ample evidence of further progressive deterioration. In other words, do not choose the most catastrophic scenarios for your immediate planning.
- Do identify vulnerabilities and a realistic scenario for your country. There are as many scenarios as countries and regions.
- Do reach out to other programs and departments by promoting a culture of preparedness. Do not believe that you are the exclusive owner of disaster management for climate change (or any other hazard) in the Ministry of Health.
- Do invest in capacity building. The health system's coping capacity, already overtaxed, must be improved. Participate constructively in all mini-crises of other technical programs.
- Do not overly rely on stockpiling or material equipment and gadgets. The future is in improving the health system and its human resources.
- Do keep yourself up-to-date of new emerging evidence and reassess your priorities regularly.

Further reinforcing disaster risk reduction, early warning, and health action in emergencies can help to ensure that people are better protected from the increasing hazards of extreme weather and from any other effects of climate change.



The **Regional Disaster Information Center's (CRID)** mission is to promote the development of a culture of prevention in Latin American and Caribbean countries through the compilation and dissemination of disaster-related information and the promotion of cooperative efforts to improve risk management in the Region.

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### Subscribe to the electronic bulletin CRID News

Since last January – and on a monthly basis – the CRID is sending the electronic bulletin *CRID News* to its users. This bulletin includes all the news relating to CRID services and products, new publications, Disasters Controlled Vocabulary (DCV) and invitations for gatherings and events during the month in progress. To subscribe and receive the bulletin, write an e-mail to the following address: [actualidad@crid.or.cr](mailto:actualidad@crid.or.cr).

### Change of e-mail address

From now on, CRID's address will be [contactenos@crid.or.cr](mailto:contactenos@crid.or.cr). For information requests, the sending of materials or any other matter, you can contact the CRID at this new address.

### Coming soon - the launch of an interactive DVD

The CRID will make a new DVD available containing a series of information resources on risk management in andean countries, compiled during the implementation of the project "*Creation of Information Centres and Virtual Libraries for Disaster Prevention and Response: the BiVa-PaD Network*". This will facilitate quick access to information resources through search tools and an interactive map by which specific information is accessed on each country regarding its characteristic geographical aspects, the hazards and disasters to which it is exposed and the regulations which currently govern the area of risk management.

**Disasters: Preparedness and Mitigation in the Americas** is the Newsletter of the Area on Emergency Preparedness and Disaster Relief of the Pan American Health Organization, Regional Office for the Americas of the World Health Organization. The reported events, activities and programs do not imply endorsement by PAHO/WHO, nor do the statements made necessarily represent the policy of the Organization. The publication of this Newsletter has been made possible through the financial support of the Division of Humanitarian Assistance, Peace and Security of the Canadian International Development Agency (HAPS/CIDA) and the Office of Foreign Disaster Assistance of the U.S. Agency for International Development (OFDA/AID). Correspondence and inquiries should be addressed to:

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